

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Oregon Republican Party

ADDRESS (number and street)

Post Office Box 789

☐Check if different  
than previously  
reported. (ACC)

Salem

OR

97308

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2006

through

04

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles S. Oakes

Signature of Treasurer

Electronically Filed by Charles S. Oakes

Date

12

18

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**

(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	4	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		9089.32
(b) Cash on Hand at Beginning of Reporting Period .....	18171.04	
(c) Total Receipts (from Line 19) .....	17492.00	108795.64
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	35663.04	117884.96
7. Total Disbursements (from Line 31) .....	25346.68	107568.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10316.36	10316.36
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	156044.04	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7255.00	19576.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	10237.00	69062.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	17492.00	88638.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	17492.00	93938.50
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	414.61
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	14442.53
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	14442.53
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	17492.00	108795.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17492.00	94353.11

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	778.38	6830.99
(ii) Non-Federal Share.....	4410.89	38708.89
(b) Other Federal Operating Expenditures.....	11472.75	33795.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	16662.02	79335.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	8684.66	28232.77
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	8684.66	28232.77
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	25346.68	107568.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20935.79	68859.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	17492.00	93938.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17492.00	93938.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12251.13	40626.94
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	414.61
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12251.13	40212.33

**SCHEDULE L (FEC Form 3X)**

6 / 25

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Oregon Republican Party		
NAME OF ACCOUNT KEY LEVIN		
	<b>COLUMN A TOTAL THIS PERIOD</b>	<b>COLUMN B YEAR-TO-DATE</b>
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	10.75	43.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	10.75	43.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	830.00	862.25
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	830.00	862.25
10. DISBURSEMENTS..... (From Line 6)	10.75	43.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	819.25	819.25

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**Use separate schedule(s)  
for each category of the  
Aggregation PageFOR LINE NUMBER:  
(check only one)

PAGE 7 / 25

<input type="checkbox"/>	4a	<input type="checkbox"/>	4c	<input checked="" type="checkbox"/>	5
<input type="checkbox"/>	4b	<input type="checkbox"/>	4d		

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial) / Full Organization Name

Oregon Republican Party

Mailing Address c/o Key Bank Levin Account  
1500 Edgewater St NWCity State Zip Code  
Salem OR 97302Purpose of Disbursement  
Bank Fee

Transaction ID: 4B80930.E12642

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	6

Amount of Each Disbursement this Period

10.75
-------

Account: 8

SUBTOTAL of Disbursements This Page (optional) .....

10.75

TOTAL This Period (last page this line number only) .....

10.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Jed Meese

Mailing Address 88 Granite Street

City

Ashland

State

OR

Zip Code

97520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vitaline Corporation

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 6

Transaction ID: 81128.C99249

Amount of Each Receipt this Period

255.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Bond Starker

Mailing Address PO Box 809

City

Corvallis

State

OR

Zip Code

97339-0809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Starker Forests

Occupation

Forester

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 6

Transaction ID: 81128.C99298

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Donna Woolley

Mailing Address PO Box 43

City

Drain

State

OR

Zip Code

97435-0043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eagles View Management

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 6

Transaction ID: 81128.C99227

Amount of Each Receipt this Period

6000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

7255.00

**TOTAL** This Period (last page this line number only) .....

7255.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Benton County Clerk

Mailing Address 120 NW 4th St

City Corvallis State OR Zip Code 97330-4734

Purpose of Disbursement  
List Rental OGOP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81127.E15992

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2006

Amount of Each Disbursement this Period

30.00

LIST RENTAL OGOP

**B.**

Full Name (Last, First, Middle Initial)  
Vance Day

Mailing Address PO Box 546

City Salem State OR Zip Code 97308-0546

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81127.E16003

Date of Disbursement

MM / DD / YYYY  
04 / 26 / 2006

Amount of Each Disbursement this Period

243.80

TRAVEL

**C.**

Full Name (Last, First, Middle Initial)  
Deschutes County Clerk

Mailing Address 1300 NW Wall St. Suite #200

City Bend State OR Zip Code 97701-1960

Purpose of Disbursement  
List Rental OGOP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81127.E16001

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2006

Amount of Each Disbursement this Period

25.00

LIST RENTAL OGOP

**SUBTOTAL** of Disbursements This Page (optional) .....

298.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Deschutes County Clerk

Mailing Address 1300 NW Wall St. Suite #200

City Bend State OR Zip Code 97701-1960

Purpose of Disbursement  
List Rental OGOP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81127.E16006

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

LIST RENTAL OGOP

**B.**

Full Name (Last, First, Middle Initial)  
Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City Clearwater State FL Zip Code 34622-

Purpose of Disbursement  
List Management Service OGOP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81127.E15987

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1650.00

LIST MANAGEMENT SERVICE  
OGOP

**C.**

Full Name (Last, First, Middle Initial)  
Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City Clearwater State FL Zip Code 34622-

Purpose of Disbursement  
List Management Service OGOP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80930.E12187

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

LIST MANAGEMENT SERVICE  
OGOP

**SUBTOTAL** of Disbursements This Page (optional) .....

2850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 25

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	<b>Transaction ID:</b> 80930.E12188 <b>Date of Disbursement</b>
Mailing Address 12450 Automobile Boulevard	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 6</div> </div>
City Clearwater State FL Zip Code 34622-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement List Management Service OGOP	<div> <div></div> <div>1000.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>LIST MANAGEMENT SERVICE OGOP</b>
<b>B.</b> Full Name (Last, First, Middle Initial) FLS Connect	<b>Transaction ID:</b> 81127.E15988 <b>Date of Disbursement</b>
Mailing Address 7320 N Dreamy Draw Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 0 6</div> </div>
City Phoenix State AZ Zip Code 85020-5212	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising Phone Calls OGOP	<div> <div></div> <div>4866.80</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>FUNDRAISING PHONE CALLS OGOP</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Amy Langdon	<b>Transaction ID:</b> 81127.E15997 <b>Date of Disbursement</b>
Mailing Address 2830 Foxhaven Dr SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 6</div> </div>
City Salem State OR Zip Code 97306-2526	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div> <div></div> <div>1235.18</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>TRAVEL</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**7101.98**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Stafford Studios

Mailing Address 11594 SE Meadowgold Place

City Clackamas State OR Zip Code 97015-

Purpose of Disbursement  
Web Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80930.E12189

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.00

WEB SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

10700.78

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Amy Langdon

Mailing Address 2830 Foxhaven Dr SE

City State Zip Code  
Salem OR 97306-2526

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80930.E12151

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2291.95

FEA PAYROLL

**B.**

Full Name (Last, First, Middle Initial)

Amy Langdon

Mailing Address 2830 Foxhaven Dr SE

City State Zip Code  
Salem OR 97306-2526

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80930.E12152

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2291.95

FEA PAYROLL

**C.**

Full Name (Last, First, Middle Initial)

Kelsey Schmidt

Mailing Address 1794 SW Fellows St Apt 8

City State Zip Code  
Mcminnville OR 97128-7318

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80930.E12174

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.83

FEA PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

4709.73

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Kelsey Schmidt

Mailing Address 1794 SW Fellows St Apt 8

City McMinnville State OR Zip Code 97128-7318

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80930.E12175

Date of Disbursement

/   /

Amount of Each Disbursement this Period

148.04

FEA PAYROLL

**B.**

Full Name (Last, First, Middle Initial)  
Belinda Smith

Mailing Address 687 SW Concord Way

City Beaverton State OR Zip Code 97006-

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80930.E12176

Date of Disbursement

/   /

Amount of Each Disbursement this Period

516.62

FEA PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Cindy Taylor

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80930.E12163

Date of Disbursement

/   /

Amount of Each Disbursement this Period

947.52

FEA PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1612.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Cindy Taylor

Mailing Address 595 Rockwood St SE

City State Zip Code  
Salem OR 97306-1756

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80930.E12164

Date of Disbursement

/   /

Amount of Each Disbursement this Period

947.51

FEA PAYROLL

**B.**

Full Name (Last, First, Middle Initial)

David Taylor

Mailing Address 595 Rockwood St SE

City State Zip Code  
Salem OR 97306-1756

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80930.E12171

Date of Disbursement

/   /

Amount of Each Disbursement this Period

589.68

FEA PAYROLL

**C.**

Full Name (Last, First, Middle Initial)

David Taylor

Mailing Address 595 Rockwood St SE

City State Zip Code  
Salem OR 97306-1756

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80930.E12172

Date of Disbursement

/   /

Amount of Each Disbursement this Period

316.95

FEA PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1854.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)

David Taylor

Mailing Address 595 Rockwood St SE

City  
Salem

State  
OR

Zip Code  
97306-1756

Purpose of Disbursement  
FEA Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 81127.E16005

Date of Disbursement

/   /

Amount of Each Disbursement this Period

508.61

FEA PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

508.61

**TOTAL** This Period (last page this line number only) .....

8684.66



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 17 / 25

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AristotleNature of Debt (Purpose):  
Computer Support

Mailing Address 205 Pennsylvania Ave SE

City State ZIP Code  
Washington DC 20003-

Outstanding Balance Beginning This Period

1950.00

Transaction ID: LS80930.E9875

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1950.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
FLS ConnectNature of Debt (Purpose):  
Fundraising Phone Calls  
OGOP

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code  
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

21811.30

Transaction ID: LS81127.E15988

Amount Incurred This Period

4866.80

Payment This Period

4866.80

Outstanding Balance at Close of This Period

21811.30

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Direct Mail Systems, IncNature of Debt (Purpose):  
List Management Service  
OGOP

Mailing Address 12450 Automobile Boulevard

City State ZIP Code  
Clearwater FL 34622-

Outstanding Balance Beginning This Period

16941.68

Transaction ID: LS80930.E12187

Amount Incurred This Period

5340.04

Payment This Period

3650.00

Outstanding Balance at Close of This Period

18631.72

**1) SUBTOTALS** This Period This Page (optional).....

42393.02

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 18 / 25

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Donnelley Marketing Inc.Nature of Debt (Purpose):  
List Management Services  
OGOP

Mailing Address 311 W Monroe Str 7th Fl

City State ZIP Code  
Chicago IL 60694-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS81205.E16189

Amount Incurred This Period

18418.87

Payment This Period

0.00

Outstanding Balance at Close of This Period

18418.87

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
United States TreasuryNature of Debt (Purpose):  
FEA Payroll Taxes

Mailing Address US Department of Treasury

City State ZIP Code  
Ogden UT 84403-

Outstanding Balance Beginning This Period

6127.05

Transaction ID: LS81215.E16395

Amount Incurred This Period

2128.63

Payment This Period

0.00

Outstanding Balance at Close of This Period

8255.68

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Office Depot\*\*Nature of Debt (Purpose):  
Office Supplies

Mailing Address 2945 Liberty St S

City State ZIP Code  
Salem OR 97306-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS81205.E16191

Amount Incurred This Period

112.23

Payment This Period

0.00

Outstanding Balance at Close of This Period

112.23

**1) SUBTOTALS** This Period This Page (optional).....

26786.78

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 19 / 25

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Oregon Department of RevenueNature of Debt (Purpose):  
FEA Payroll Taxes

Mailing Address P.O. Box 14800

City State ZIP Code  
Salem OR 97309-0920

Outstanding Balance Beginning This Period

2705.47

Transaction ID: LS81215.E16382

Amount Incurred This Period

777.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

3483.20

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Donna WoolleyNature of Debt (Purpose):  
Contribution Refund

Mailing Address PO Box 43

City State ZIP Code  
Drain OR 97435-0043

Outstanding Balance Beginning This Period

4000.00

Transaction ID: LS81117.E15765

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Computer VillageNature of Debt (Purpose):  
Computer Support

Mailing Address 4075 76th Ave NE

City State ZIP Code  
Salem OR 97305-

Outstanding Balance Beginning This Period

535.02

Transaction ID: LS81013.E15232

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

535.02

**1) SUBTOTALS** This Period This Page (optional).....

8018.22

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 20 / 25

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Joan AustinNature of Debt (Purpose):  
Contribution Refund

Mailing Address PO Box 209

City State ZIP Code  
Newberg OR 97132-0209

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS81116.E15760

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Certified PropertyNature of Debt (Purpose):  
Rent

Mailing Address PO Box 269

City State ZIP Code  
Salem OR 97308-0269

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS81127.E15989

Amount Incurred This Period

6076.20

Payment This Period

3000.00

Outstanding Balance at Close of This Period

3076.20

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&T WirelessNature of Debt (Purpose):  
Phone service

Mailing Address PO Box 30459

City State ZIP Code  
Los Angeles CA 90030-

Outstanding Balance Beginning This Period

67180.90

Transaction ID: LS80930.E11336

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

67180.90

**1) SUBTOTALS** This Period This Page (optional).....

72757.10

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 21 / 25

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Integra TelecomNature of Debt (Purpose):  
Phone Service

Mailing Address PO Box 34988

City State ZIP Code  
Seattle WA 98124-1988

Outstanding Balance Beginning This Period

658.01

Transaction ID: LS81127.E16002

Amount Incurred This Period

650.07

Payment This Period

658.01

Outstanding Balance at Close of This Period

650.07

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Ricoh Customer Finance Corp.Nature of Debt (Purpose):  
Equipment Lease

Mailing Address PO Box 310010273

City State ZIP Code  
Pasadena CA 91110-0001

Outstanding Balance Beginning This Period

248.09

Transaction ID: LS81205.E16196

Amount Incurred This Period

506.16

Payment This Period

0.00

Outstanding Balance at Close of This Period

754.25

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Salem Conference CenterNature of Debt (Purpose):  
Facility Rental/Food/Beve-  
rage

Mailing Address 200 Commercial St SE

City State ZIP Code  
Salem OR 97301-

Outstanding Balance Beginning This Period

4684.60

Transaction ID: LS81127.E16035

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4684.60

**1) SUBTOTALS** This Period This Page (optional).....

6088.92

**2) TOTALS** This Period (last page this line number only).....

156044.04

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

156044.04

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 22 / 25  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

**A. Full Name (Last, First, Middle Initial)**

Pitney Bowes Credit Corp

Mailing Address

P. O. Box 85460

City

State

Zip Code

Louisville

KY

40285-5460

Purpose of Disbursement:

Equipment Lease

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 4111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

40637.30

Date

M M / D D / Y Y Y Y

0 4 / 1 0 / 2 0 0 6

Transaction ID: H480930.E12182

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.00

209.69

246.69

**B. Full Name (Last, First, Middle Initial)**

Pitney Bowes Credit Corp

Mailing Address

P. O. Box 85460

City

State

Zip Code

Louisville

KY

40285-5460

Purpose of Disbursement:

Equipment Lease

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 4111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

40883.99

Date

M M / D D / Y Y Y Y

0 4 / 1 4 / 2 0 0 6

Transaction ID: H480930.E12183

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.00

209.69

246.69

**C. Full Name (Last, First, Middle Initial)**

Pitney Bowes Credit Corp

Mailing Address

P. O. Box 85460

City

State

Zip Code

Louisville

KY

40285-5460

Purpose of Disbursement:

Equipment Lease

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 4111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

44130.68

Date

M M / D D / Y Y Y Y

0 4 / 2 1 / 2 0 0 6

Transaction ID: H480930.E12184

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.00

209.69

246.69

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

111.00

629.07

740.07

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 23 / 25  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

**A. Full Name (Last, First, Middle Initial)**

Pitney Bowes Credit Corp

Mailing Address

P. O. Box 85460

City

State

Zip Code

Louisville

KY

40285-5460

Purpose of Disbursement:  
Equipment LeaseCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 4111

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

45538.88

Date 04 / 28 / 2006

Transaction ID: H480930.E12185

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.00

209.69

246.69

**B. Full Name (Last, First, Middle Initial)**

Authnet Gateway Billing

Mailing Address

293 Boston Post Rd W Ste 220

City

State

Zip Code

Marlborough

MA

01752-

Purpose of Disbursement:  
Credit Card FeeCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 4111

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

40380.61

Date 04 / 04 / 2006

Transaction ID: H481126.E15952

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.50

8.50

10.00

**C. Full Name (Last, First, Middle Initial)**

Discover Corporate Card

Mailing Address

PO Box 30423

City

State

Zip Code

Salt Lake City

UT

84130-0423

Purpose of Disbursement:  
Credit Card FeeCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 4111

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

40370.61

Date 04 / 04 / 2006

Transaction ID: H481127.E15984

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.00

17.00

20.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

41.50

235.19

276.69

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 24 / 25  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

**A. Full Name (Last, First, Middle Initial)**

CTS Holdings LLC

## Mailing Address

c/o Key Bank 1500 Edgewater St NW

City State Zip Code

Salem OR 97304-

Purpose of Disbursement:  
Credit Card FeeCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 4111

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

40390.61

Date MM / DD / YYYY  
04 / 07 / 2006

Transaction ID: H481127.E15985

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.50

8.50

10.00

**B. Full Name (Last, First, Middle Initial)**

Certified Property

## Mailing Address

PO Box 269

City State Zip Code

Salem OR 97308-0269

Purpose of Disbursement:  
RentCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 4111

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43883.99

Date MM / DD / YYYY  
04 / 14 / 2006

Transaction ID: H481127.E15989

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

450.00

2550.00

3000.00

**C. Full Name (Last, First, Middle Initial)**

Key Bank\*\*

## Mailing Address

1500 Edgewater St NW

City State Zip Code

Salem OR 97304-

Purpose of Disbursement:  
Bank FeeCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 4111

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

45292.19

Date MM / DD / YYYY  
04 / 28 / 2006

Transaction ID: H481127.E15998

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.53

2.97

3.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

452.03

2561.47

3013.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 25 / 25  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Integra Telecom

Mailing Address

PO Box 34988

City	State	Zip Code
Seattle	WA	98124-1988

Purpose of Disbursement:  
 Phone Service

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 4111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

44788.69

Date 

M	M
0	4

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H481127.E16002

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.70		559.31		658.01

**B. Full Name (Last, First, Middle Initial)**  
 U.S. Postmaster

Mailing Address

410 Mill St SE

City	State	Zip Code
Salem	OR	97301-

Purpose of Disbursement:  
 Postage OGOP

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 4111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

45288.69

Date 

M	M
0	4

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H481127.E16004

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

**C. Full Name (Last, First, Middle Initial)**  
 Key Bank\*\*

Mailing Address

1500 Edgewater St NW

City	State	Zip Code
Salem	OR	97304-

Purpose of Disbursement:  
 Bank Fee

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 4111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

45539.88

Date 

M	M
0	4

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H481127.E16011

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.15		0.85		1.00

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.85		985.16		1159.01

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
778.38	4410.89	5189.27